

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN
Date Stamp (Received)
MAR 27 2017
Bayfield Co. Zoning Dept.

ENTERED
Permit #: 17-0137
Date: 5-16-17
Amount Paid: \$1003-27-17
Refund:

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVATE		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER	
Owner's Name: MARK S. COLLINS, JULE F. COLLINS		Mailing Address: 6936 OAKMERE RD, ROCKSTON, MN 55901		City/State/Zip: 567 269 9779		Telephone: 567 260 4626		Cell Phone: 567 269 9779		Plumber Phone:		Plumber Phone:	
Address of Property: 47105 TWIN PINE LN		City/State/Zip: CAIRIE WI 54821		Contractor Phone: 715 505 1348		Plumber: N/A		Agent Mailing Address (include City/State/Zip):		Written Authorization Attached <input type="checkbox"/> Yes <input type="checkbox"/> No		Plumber Phone:	
Authorized Agent: (person Signing Application on behalf of Owner(s)) JOSH YODER		PIN: (23 digits) 04-081244063940016106000		Recorded Document: (i.e. Property Ownership) Volume 1067 Page(s) 121-538		Subdivision: DIAMOND LAKE SUB.		Lot Size		Acreage		TACRES	
PROJECT LOCATION 1/4, 1/4		Gov't Lot 6		Lot(s) CSM 1067 Rd		Lot(s) No.		Block(s) No.		Volume		Page(s)	
Section 29, Township 44 N, Range 06 W		Town of: GRADVIEW		Distance Structure is from Shoreline: 88' feet		Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Distance Structure is from Shoreline: 88' feet		Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Value at Time of Completion * include donated time & material \$40,000	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water	Existing Structure: (if permit being applied for is relevant to it)			
							Length: 22	Width: 16		
							Proposed Construction:	Length: 28	Width: 20	
							Proposed Use	Proposed Structure	Dimensions	Square Footage
							<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1
<input type="checkbox"/> Addition/Alteration	<input checked="" type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input type="checkbox"/> Sanitary (Exists) Specify Type: 2" white PVC with 4" vent	<input checked="" type="checkbox"/> Well				
<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> None			
<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation			
<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation	<input type="checkbox"/> Foundation			

Proposed Use	Proposed Structure	Dimensions	Square Footage	Existing Structure: (if permit being applied for is relevant to it)								
				Length: 22	Width: 16							
				Proposed Construction:	Length: 28	Width: 20						
				Proposed Use	Proposed Structure	Dimensions	Square Footage					
				<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	<input type="checkbox"/> with Loft	<input type="checkbox"/> with a Porch	<input type="checkbox"/> with (2nd) Deck	<input type="checkbox"/> with Attached Garage	<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities	<input type="checkbox"/> Mobile Home (manufactured date)
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Addition/Alteration (specify)	<input type="checkbox"/> Accessory Building (specify)	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Addition/Alteration (specify)	<input type="checkbox"/> Accessory Building (specify)	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)
<input type="checkbox"/> Rec'd for Issuance	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)
<input type="checkbox"/> Secretarial Staff	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)	<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/> Other: (explain)

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): CHRYSTAL J. COLLINS Date: 3-22-2017
(If there are Multiple Owners listed on the Deed All Owners must sign or left(s) of authorization must accompany this application)

Authorized Agent: (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

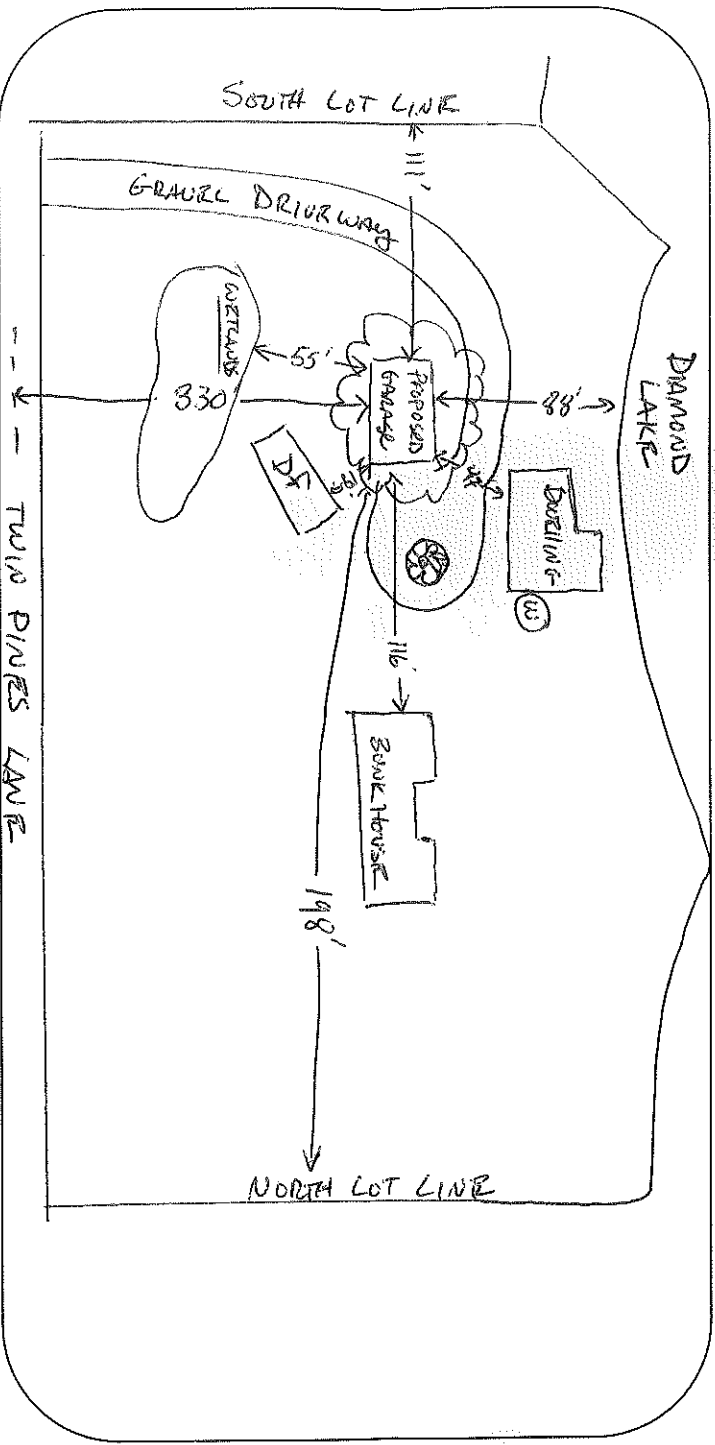
Address to send permit: W490 CHIPPERWICK LANE ROAD, HOLLYWOOD, WI 54843

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (*): **(*) Driveway and (*) Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)**
- (6) Show any (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
- (7) Show any (*): **(*) Wetlands; or (*) Slopes over 20%**



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	330' Feet	Setback from the Lake (ordinary high-water mark)	38' Feet
Setback from the Established Right-of-Way	267' Feet	Setback from the River, Stream, Creek	
Setback from the North Lot Line	192' Feet	Setback from the Bank or Bluff	
Setback from the South Lot Line	111' Feet	Setback from Wetland	55' Feet
Setback from the West Lot Line	88' Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	400' Feet	Elevation of Floodplain	
Setback to Septic Tank or Holding Tank	72' Feet	Setback to Well	50' Feet
Setback to Drain Field	18' Feet		
Setback to Privy (Portable, Composting)			

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:	Sanitary Date:
Permit Denied (Date):		Reason for Denial:		
Permit #: 17-0187		Permit Date: 5-16-17		
Is Parcel a Sub-Standard Lot <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Deed of Record <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Mitigation Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is Used/Contiguous Lot(s) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Mitigation Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Affidavit Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Case #: N/A		Affidavit Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Was Parcel Legally Created <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Were Property Lines Represented by Owner Was Property Surveyed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Was Proposed Building Site Delineated <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Inspection Record: Existing garage in location. Not Staked/Existing Garage. Location Appears Code Compliant ok to issue LUP permit.		Zoning District (R1)		Lakes Classification (3)
Date of Inspection: 4-25-17		Inspected by: Gregory Robert Schuman		Date of Re-Inspection: 5/15/2017
Conditions(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No they need to be attached)				
Not to be used for human habitation.				
No pressurized water to enter structure unless served by a code compliant pump.				
Signature of Inspector: [Signature]				
Date of Approval: 5/15/2017				
Hold For Sanitary: <input type="checkbox"/> Hold For TBA: <input type="checkbox"/> Hold For Affidavit: <input type="checkbox"/> Hold For Fees: <input type="checkbox"/>				

City, Village, State or Federal
Permits May Also Be Required

LAND USE – X
SANITARY –
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **17-0137** Issued To: **Mark & Julie Collins**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **29** Township **44** N. Range **6** W. Town of **Grand View**

Gov't Lot Lot **7** Block Subdivision **Diamond Lake** CSM#

For: **Residential Accessory Structure: [1.5- Story; Garage (20' x 28') = 560 sq. ft.]**
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not to be used for human habitation. No pressurized water to enter structure unless served by a code compliant POWTS.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.
This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.
This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

May 16, 2017

Date